

*****This is only a preview of the examination questions. To take the actual examination, please go back to the official bulletin, and click the examination link at the bottom.*****

Training and Experience Evaluation

Emergency Services Coordinator

California Office of Emergency Services

The California civil service selection system is merit-based and eligibility for appointment is established through a formal examination process. This examination consists of a Training and Experience evaluation used to evaluate your education, training and experience relevant to the position.

This Training and Experience evaluation is a scored component accounting for 100% of your rating in the examination process. It is important to complete the questionnaire carefully and accurately. Your responses are subject to verification before appointment to a position.

VERY IMPORTANT: PLEASE READ THIS ENTIRE SECTION CAREFULLY.

Before a hiring decision will be made, your responses will be verified. A hiring manager or personnel staff member will contact the references you have provided to confirm job dates, experiences, duties, achievements, and/or possession of knowledge, skills, and abilities. Failure to provide adequate references AND contact information may significantly limit our ability to make a job offer.

If it is determined at any time that you have made any false or inaccurate representations in any of the information you have provided, you may be disqualified from this process, suffer loss of State employment, and/or suffer loss of right to compete in any future State of California hiring processes. You are solely responsible for the accuracy of the responses provided.

This warning has been provided to protect your rights as a job candidate as well as the rights of the State. Be advised that you are expected to answer truthfully and accurately.

Verification References

Provide references who can verify the information you provide in this exam. Prior to receiving an offer for employment, these references will be contacted to confirm that you have paid or unpaid experience pertaining to the duties and requirements listed in this exam. List all references that apply.

EMPLOYMENT

Job Reference 1

Job Title:

Organization Name and Address:

Date Worked: From: To:

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities:

Contact Phone Number(s) of the above Individual(s):

Job Reference 2

Job Title:

Organization Name and Address:

Date Worked: From: To:

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities:

Contact Phone Number(s) of the above Individual(s):

Job Reference 3

Job Title:

Organization Name and Address:

Date Worked: From: To:

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities:

Contact Phone Number(s) of the above Individual(s):

Job Reference 4

Job Title:

Organization Name and Address:

Date Worked: From: To:

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities:

Contact Phone Number(s) of the above Individual(s):

Job Reference 5

Job Title:

Organization Name and Address:

Date Worked: From: To:

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities:

Contact Phone Number(s) of the above Individual(s):

Job Reference 6

Job Title:

Organization Name and Address:

Date Worked: From: To:

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities:

Contact Phone Number(s) of the above Individual(s):

EDUCATION

Education Reference 1

School Name and Address:

Degree(s) Earned:

Date(s) Attended: From: To:

Education Reference 2

School Name and Address:

Degree(s) Earned:

Date(s) Attended: From: To:

Education Reference 3

School Name and Address:

Degree(s) Earned:

Date(s) Attended: From: To:

Education Reference 4

School Name and Address:

Degree(s) Earned:

Date(s) Attended: From: To:

Sections 1&2: Tasks

Instructions:

Rate your experience performing specific job-related tasks.

Respond to each of the following statements by indicating how the statement applies to you. You are required to respond to every question and provide relevant examples. Also, indicate the references who can verify the information provided.

In responding to each statement, you may refer to your WORK EXPERIENCE, whether paid or volunteer, your EDUCATION, and/or FORMAL TRAINING COURSES you have completed.

PLEASE NOTE: This examination is designed to gain an overall assessment of your education, training, and experience as it directly relates to the duties and the knowledge, skills and abilities required for this position. Possession of specific education and/or training is **not** required to be successful in this examination; however, such achievements may substitute for desirable levels of experience. All components of this examination have been carefully validated by tying them directly to job requirements and documenting their relevance to the position.

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|------------|--|--|---|--|
| ITEM | TASK STATEMENT [INSERT TASK STATEMENT HERE] | | | |
| | | TIME/DURATION: | QUALIFICATIONS: | REFERENCES: |
| EXPERIENCE | Describe your work experience relevant to performing <u>this task</u> , both paid and volunteer. | I have Choose an item. experience performing <u>this task</u> . | Provide relevant examples of the more complex work you have been responsible for that demonstrates your ability to perform <u>this task</u> (1000 characters max): <div></div> | Identify the reference(s) who can verify this information: <input type="checkbox"/> job ref. 1 <input type="checkbox"/> job ref. 2 <input type="checkbox"/> job ref. 3 <input type="checkbox"/> job ref. 4 <input type="checkbox"/> job ref. 5 <input type="checkbox"/> job ref. 6 |
| EDUCATION | Describe your education relevant to performing <u>this task</u> . | I have completed Choose an item. units of college level courses directly related to performing <u>this task</u> . | List the courses you have taken which are relevant to performing <u>this task</u> and are verifiable on a transcript (1000 characters max): <div></div> | Identify the university where this education was received: <input type="checkbox"/> educ. ref. 1 <input type="checkbox"/> educ. ref. 2 <input type="checkbox"/> educ. ref. 3 <input type="checkbox"/> educ. ref. 4 |
| TRAINING | Describe your training relevant to performing <u>this task</u> . | I have completed Choose an item. hours of training directly related to performing <u>this task</u> . | List all class titles relevant to performing <u>this task</u> , and any certifications or acknowledgements received (1000 characters max): <div></div> | Provide the name and contact information of someone who can verify this information: <div></div> |

TASKS TO INCLUDE IN THE EXAM

Section 1

| ITEM # | Emergency Services Coordinator |
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| 1 | Analyzing and providing interpretation of local, state, and/or federal laws, regulations, policies, and/or procedures. |
| 2 | Representing a department, organization, and/or agency by participating in meetings and providing briefings to stakeholders. |
| 3 | Providing responses (written and verbal) to inquiries from government agencies, other organizations, and/or the public based on applicable law, regulations, and/or policies. |
| 4 | Coordinating and administering emergency management programs to ensure compliance with applicable law, regulations, policies, and procedures. |
| 5 | Utilizing State and/or Federal Emergency Management Systems (e.g., California Disaster and Civil Defense and Master Mutual Aid Agreement, Standardized Emergency Management System [SEMS], Incident Command System [ICS], National Incident Management System [NIMS], or other State's Emergency Management systems). |
| 6 | Review, analyze, make recommendations, and maintain emergency plans and/or procedures. |
| 7 | Writing documents (e.g., situation reports, surveys, proposals, summaries, briefings, etc.) as required by leadership. |
| 8 | Assisting in the development and maintenance of emergency management plans and/or procedures. |
| 9 | Provide analysis of emergency events and formulate recommendations on appropriate courses of action. |

Section 2

| ITEM | TASK STATEMENT [INSERT TASK STATEMENT HERE] | | | |
|------------|--|---|--|--|
| | | TIME/DURATION: | QUALIFICATIONS: | REFERENCES: |
| EXPERIENCE | Describe your work experience relevant to performing <u>this task</u> , both paid and volunteer. | I have Choose an item. experience performing <u>this task</u> . | Provide relevant examples of the more complex work you have been responsible for that demonstrates your ability to perform <u>this task</u> (1000 characters max): <input type="text"/> | Identify the reference(s) who can verify this information: <input type="checkbox"/> job ref. 1 <input type="checkbox"/> job ref. 2 <input type="checkbox"/> job ref. 3 <input type="checkbox"/> job ref. 4 <input type="checkbox"/> job ref. 5 <input type="checkbox"/> job ref. 6 |
| TRAINING | Describe your training relevant to performing <u>this task</u> . | I have completed Choose an item. hours of training directly related to performing <u>this task</u> . | List all class titles relevant to performing <u>this task</u> , and any certifications or acknowledgements received (1000 characters max): <input type="text"/> | Provide the name and contact information of someone who can verify this information: <input type="text"/> |

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| 10 | Working in an emergency operations center (e.g., Department Operations Center, Coordination Center, Communications Center, etc.). |
| 11 | Resolving time sensitive issues and/or information conflicts promptly and accurately. |

Section 3

| | | | | |
|------------|--|--|---|--|
| ITEM | TASK STATEMENT [INSERT TASK STATEMENT HERE] | | | |
| | | TIME/DURATION: | QUALIFICATIONS: | REFERENCES: |
| EXPERIENCE | Describe your work experience relevant to performing this task, both paid and volunteer. | I have Choose an item. experience performing <u>this task</u> . | Provide relevant examples of the more complex work you have been responsible for that demonstrates your ability to perform <u>this task</u> (1000 characters max): <div></div> | Identify the reference(s) who can verify this information: <input type="checkbox"/> job ref. 1 <input type="checkbox"/> job ref. 2 <input type="checkbox"/> job ref. 3 <input type="checkbox"/> job ref. 4 <input type="checkbox"/> job ref. 5 <input type="checkbox"/> job ref. 6 |

| | |
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| 12 | Coordinating with Local, State, Tribal, Federal, and/or non-governmental agencies in all phases of emergency management. |
| 13 | Serving as a point of contact for an organization, department, and/or agency regarding emergency management issues. |

<<LOGO>>
<<Examination Title>>

Terms of Use Agreement

Examination Responses

The information you provide on this examination is expected to be true and accurate to the best of your knowledge, and must contain no willful misrepresentations or falsifications. If it is later determined that you have made any false or inaccurate representations in any of the information you have provided, you may be removed from the examination and/or eligible list(s) resulting from this examination, suffer loss of State employment, and/or suffer loss of the right to compete in any future State of California hiring processes. You are the person solely responsible for the accuracy of the responses you provide.

Retaking the Examination

Retaking this examination under another or a new User I.D. and password, Social Security Number (voluntary, not required, information), or name is not allowed. If you do retake this examination before the <<too soon time>> months are up, the new result will be inactivated, and you will have to wait <<too soon time>> months from the **date of the newest record** to retake the examination. This may result in your eligibility expiring from the list, and you having a period of ineligibility before you may retake the examination.

- ☐ I hereby assert that I am taking this examination for myself alone. I am NOT taking this examination on behalf of anyone else.
- ☐ I hereby assert my intention to provide information that is true and accurate to the best of my knowledge, and that contains no willful misrepresentations or falsifications.
- ☐ I understand that, if it is later determined that I did make any false or inaccurate representations in any of my responses, I may be removed from this examination and/or the eligible list(s) resulting from the examination, suffer loss of State employment, and/or suffer loss of the right to compete in any future State of California hiring processes.
- ☐ I understand that I am the person solely responsible for the accuracy of the responses I provide.
- ☐ I understand that I may take this examination only once every <<too soon time>> months. I hereby assert that I have not taken this examination within the last <<too soon time>> months under any other User I.D. and password, Social Security Number, or name. I understand that, if I retake this examination before the <<too soon time>> months are up, the new result will be inactivated, and that I will then have to wait another <<too soon time>> months to retake this examination. I understand that, by retaking this examination too early, once my eligibility expires, there may be a period of time that I am ineligible to apply for vacancies for this classification.